EXHIBIT 8

	NOTICE OF APPEAL/PETITION TO THE EQUAL EMPLOYMENT OPPORTUNITY COMMISSION OFFICE OF FEDERAL OPERATIONS		
		ee	
٠	2. Home/mailing address:	Social Security No.:	
	3. Name and address of attorney or other representative, if any: PAUL Phillips, 105 Fain Field Dair	Phillips, 105 Faintied Drive, Entenprise, Alabama 36330	
	(334) 255-8074	5.Representative's telephone number (if applicable): (334) る55-256み	
	6. Has the appellant filed a formal complaint with his/her agency? No Yes - indicate the Agency's complaint number: BPEGFOØIØ3BØØ7Ø		
	7. Name of the agency being charged with discrimination: U. S. ARMY Aviation Technical Test Center (USAATTC) 8. Location of the duty station or local facility in which the complaint arose: Cainn's Almy Ainticid, Fort Rucker, Alabama 36362 9. Has a FINAL DECISION been issued by the agency, an Arbritator, FLRA, or MSPB on this complaint?		
YES (Indicate the date the appellant RECEIVED NO This appeal alleges a breach of a settlement agree		, and ATTACH A COPY.)	
	10. Has a complaint been filed on this same matter with this Commission, another agency, or through any other administrative or collective bargaining procedure? YES (Indicate the agency or procedure, complaint/docket number, and attach a copy, if appropriate). 11. Has a civil action (lawsuit) been filed in connection with this complaint? NO YES (ATTACH A COPY OF THE CIVIL ACTION FILED)		
	12. Signature of appellant or appellant's representative	13.Date: 13 December 2001	
·	NOTICE: Before mailing this appeal, be sure to <u>attach a copy of the final decision</u> form which you are appealing, if one has been issued. Any comments or brief in support MUST be filed with the Commissic AND with the agency within 30 days of the date this appeal is filed. Making a knowingly false statemen on this form is punishable by law. See 18 USC §1001. PRIVACY ACT STATEMENT ON REVERSE SIDE.		
	FOR EEOC USE ONLY:	OFO DOCKET NUMBER:	
DEFENDANT'S EXHIBIT NO. 8	EEOC FORM 573 REV 4-92		